

UTAH STATE DEPARTMENT OF HUMAN SERVICES
DIVISION OF SUBSTANCE ABUSE & MENTAL HEALTH

APPLICATION FOR DUI INSTRUCTOR RE-CERTIFICATION

Full Name

Employing Agency

Home Address & Zip Code

Business Address & Zip Code

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Home Phone

Agency Phone

Social Security Number

Employment Start Date

email address:_____

Program License #

Applicant's Signature

Date of Signature

December 2 & 3 (8:00-5:00)

The Yarrow

1800 Park Avenue

Park City, Utah 84060

800-927-7694

Breakfast and afternoon break included.

SUBMIT THIS APPLICATION TO:_____

Victoria Delheimer, Program Manager

State Division of Substance Abuse and Mental Health

120 North 200 West, Room 209

Salt Lake City, Utah 84103

Phone: (801) 538-4379

Fax: (801) 538-4696

Email: vdelheim@utah.gov